

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000088764

FILED
May 01, 2008
Secretary of State

Entity Name: COOL YOGURT PARTNERS LLC

Current Principal Place of Business:

2775 NE 187 STREET
626
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

2775 NE 187 STREET
626
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 26-0806832 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GELBER, RONALD S
11450 INTERCHANGE CIRCLE NORTH
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR () Change (X) Addition
Name: POLSKY, DAVID
Address: 2775 NE 187 STREET - 626
City-St-Zip: AVENTURA, FL 33180

Title: MR () Change (X) Addition
Name: HELLER, STEVEN
Address: 10937 WEST BROWARD BLVD
City-St-Zip: PLANTATION, FL 33324

Title: MR () Change (X) Addition
Name: HERMAN, SCOTT
Address: 2775 NE 187 STREET - 626
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEVEN HELLER

MGRM

05/01/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date